

STATEMENT OF ECONOMIC INTERESTS

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COVER PAGE CITY OF CLOVERDALE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Russell Carol

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Cloverdale/Community Successor Agency Board of Directors Mayor

Division, Board, Department, District, if applicable

Your Position

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: Please see attached

Position: Please see attached

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County _____

☐ County of _____

☒ City of Cloverdale

☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2014, through December 31, 2014.

-or-

The period covered is ____/____/____, through December 31, 2014.

☐ Leaving Office: Date Left ____/____/____
(Check one)

☐ The period covered is January 1, 2014, through the date of leaving office.

☐ Assuming Office: Date assumed ____/____/____

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 3

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5. Verification

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and complete.

Date Signed 03/18/2015

(month, day, year)

Additional Agencies/Positions.

Office, Agency, or Court List for **Carol Russell** for period 01/01/14 – 12/31/14

Name: Sonoma County Transportation Authority/Regional Climate Protection
Authority

Position: Member, Board of Directors

Jurisdiction: County of Sonoma

Name: Sonoma Marin Area Rail Transit District

Position: Member, Board of Directors

Jurisdiction: Multi-County (Sonoma and Marin Counties)

Name: Sonoma County Mayors and Council Members Association

Position: Alternate, Legislative Committee

Jurisdiction: County of Sonoma

Name: Health Action, Department of Health Services

Position: Appointed Representative for City of Cloverdale to Board

Jurisdiction: County of Sonoma

Name: Climate Protection Campaign

Position: Appointed Representative of the City of Cloverdale

Jurisdiction: Sonoma County

Name: Former Cloverdale Redevelopment Agency's Successor Agency
Oversight Board

Position: Mayor's Appointee Member

Jurisdiction: City of Cloverdale

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name CAROL RUSSELL

► NAME OF SOURCE (Not an Acronym)
Crystal Clear Windows

ADDRESS (Business Address Acceptable)
Cloverdale CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Window Washing

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 15 / 14	\$ 275.00	Clean Windows
/ /	\$	
/ /	\$	

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

Comments: Community BBQ Raffle Prize Cost of Raffle ticket \$1.00 deducted from value of prize